

\_\_\_\_\_

(Assistant Examiner) (Date)

Reynolds Jr 5/16/05  
(Legal Instruments Examiner) (Date)

~~Fz Duverne~~ 05/16/2005  
(Primary Examiner) (Date)

**Total Claims Allowed: 2**

O.G. Print Claim(s)	O.G. Print Figure
1	14

<input checked="" type="checkbox"/> Claims renumbered in the same order as presented by applicant					<input type="checkbox"/> CPA		<input type="checkbox"/> T.D.		<input type="checkbox"/> R.1.47		
Final	Original		Final	Original		Final	Original		Final	Original	
	1		31			61			121		181
	2		32			62			122		182
	3		33			63			123		183
	4		34			64			124		184
	5		35			65			125		185
	6		36			66			126		186
	7		37			67			127		187
	8		38			68			128		188
	9		39			69			129		189
	10		40			70			130		190
	11		41			71			131		191
	12		42			72			132		192
	13		43			73			133		193
	14		44			74			134		194
	15		45			75			135		195
	16		46			76			136		196
	17		47			77			137		197
	18		48			78			138		198
	19		49			79			139		199
	20		50			80			140		200
	21		51			81			141		201
	22		52			82			142		202
	23		53			83			143		203
	24		54			84			144		204
	25		55			85			145		205
	26		56			86			146		206
	27		57			87			147		207
	28		58			88			148		208
	29		59			89			149		209
	30		60			90			150		210